

AMENDMENT TRANSMITTAL LETTER				Docket No. 0020-5340PUS1																																				
Application No. 10/522,877-Conf. #5247	Filing Date February 2, 2005	Examiner S.R. Macauley	Art Unit 1651																																					
Applicant(s): Takehiko NOMURA et al.																																								
Invention: Bacterial cell wall skeleton component preparation																																								
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																								
<p style="text-align: center;">CLAIMS AS AMENDED</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%; text-align: center;">Claims Remaining After Amendment</th> <th style="width: 15%; text-align: center;">Highest Number Previously Paid</th> <th style="width: 15%; text-align: center;">Number Extra Claims Present</th> <th style="width: 15%; text-align: center;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">8</td> <td style="text-align: center;">- 37 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 52.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">1</td> <td style="text-align: center;">- 7 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 220.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td colspan="6" style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 5px;"> Multiple Dependent Claims (check if applicable) <input type="checkbox"/> </td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black; padding: 5px;"> Other fee (please specify): </td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black; padding: 5px;"> TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: </td> </tr> </tbody> </table>						Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	8	- 37 =	0	x 52.00	0.00	Independent Claims	1	- 7 =	0	x 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																																				
Total Claims	8	- 37 =	0	x 52.00	0.00																																			
Independent Claims	1	- 7 =	0	x 220.00	0.00																																			
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																								
Other fee (please specify):																																								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:																																								
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																								
<input type="checkbox"/> No additional fee is required for this amendment.																																								
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u> </u> . A duplicate copy of this sheet is enclosed.																																								
<input type="checkbox"/> A check in the amount of \$ <u> </u> is enclosed.																																								
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																								
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.																																								
<input checked="" type="checkbox"/> Credit any overpayment.																																								
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																								
 Mark J. Huell Attorney Reg. No.: 36,623																																								
Dated: <u>April 27, 2009</u>																																								
BIRCH, STEWART, KOLASCH & BIRCH, LLP 12770 High Bluff Drive Suite 260 San Diego, California 92130 (858) 356-5959																																								